District I PO Box 1980, Hobbs, NM 88241-1980				State of New Mexico (g), Minerals & Natural Resources Departme					Form C-104 Revised October 18, 1994					
District II 811 South First, Artesia, NNI 88210			OIL CONSERVATI				ION DIVISION			Instructions on back Submit to Appropriate District Office				
District III 1000 Rio Braze	• Rd., /	Artec, NN1 87410		outh Pach	Pacheco IM 87505			5 Copies						
District IV 2040 South Pag	cheen, S	ania Fc. NM 8756							AMENDED REPORT					
I.			T FOR A			AND AU	THOR	IZAT	ION TO TR	ANSP	ORT			
	Operator name and Address HS Resources, Inc.											OGRID Number		
6666 S. Sheridan, Ste 250											85556/ Reason for Filing Code			
Tuls	5 a, ()K 74133						CH/Effective -2-96-						
ά ΛΓΙ Number			Pont Name BRUSHY DRAW, DELAWARE					<u> </u>	<u> </u>	* Pool Code				
30 - 0 15-25105 Property Code			BRUSHY	ARE ' Property Na				08080						
	• •	19291	MOBILE 22 FEDERAL								, н	ell Number		
·		ce Location							2					
I 22									Feet from the	East/We	st line	County		
L					2310		South		330	East Eddy		Eddy		
UL or lot no. Section Township						from the	rom the North/South line		Feet from the	East/West line County				
										Count		Conut		
" Lse Code	י דר ''	silucing Method C	inde ¹⁴ Gas	Connection Date	c	¹⁸ C-129 Perm	it Number	1	C-129 Effective I)stc	" C-1	29 Expiration Date		
III. Oil a	nd G	P as Transpoi							·					
Transpo	rler		Transporter Name			* PO	D	" O/G	²² POB ULSTR Location					
	OGRID		and Address			<u></u>			and Description					
15694		Navajo R PO Drawe		Company	ŀ	2529210		0						
Artesia			NM 88211-0159							·				
05097 Conoco, Inc. 2529230								G	18 18 - 18 - 18 - 18 - 18 - 18 - 18 - 18		en al anti-			
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IV. Produ	uced rop	Water							· · · · · · · · · · · · · · · · · · ·					
252925		Wat	ter inje	cted into	#2	* rop ui. 529250 #								
V. Well (Comp	pletion Data												
Spud Date		2.	²⁴ Ready Date		מריי		" PBTD		" Perfora	lions	Ţ <u></u> ;	DIC. DC.MC		
" Hole Size				lasing & Tubing										
	11010	5120	··· (31	Depth Se	t		" Sack	r Cement				
										}	ort	ID-3		
										<u> </u>	X	16-96		
									chyop					
VI. Well		Data	<u></u>											
Date N				Date		¹⁸ Test Length		" Tbg. Pressure			" Csg. Pressure			
" Choke Size				Vater		" Gas		4º AOF			* Test Method			
with and that the	C IIIIOIB	ation given above	Conservation D is true and com	ivision have been plete to the best r	comp of my	lied								
knowledge and I Signature	helia	ANIAA	1 man			OIL CONSERVATION DIVISION								
TUNE MUCH IN SUM							Approved by: ORIGINAL SIGNED BY TIM W. GUM DISTRICT II SUPERVISOR							
	la Johnson	i 												
Tills Production Jech Data 0-11-96 Phone 918/488-80/12							Approval Date: JUN 2 7 1996							
" If this is a change vijonerator, fill in the personal mutager and mone of the previ							20 sperator							
	Previou Operate Signature Printed Name													
			V							1 11	••	Date		



New Mexico Oil Conservation Division C-104 Instructions

IF THIS IS AN AMENDED REPORT, CHECK THE BOX LABLED "AMENDED REPORT" AT THE TOP OF THIS DOCUMENT

Report all gas volumes at 15.025 PSIA at 60°. Report all oil volumes to the nearest whole barrel.

A request for allowable for a newly drilled or deepened well must be accompanied by a tabulation of the deviation tests conducted in accordance with Rule 111.

All sections of this form must be filled out for allowable requests on new and recompleted wells.

Fill out only sections I, II, III, IV, and the operator certifications for changes of operator, property name, well number, transporter, or other such changes.

A separate C-104 must be filed for each pool in a multiple completion.

Improperly filled out or incomplete forms may be returned to operators unapproved.

1. Operator's name and address

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- Operator's OGRID number. If you do not have one it will be assigned and filled in by the District office. 2.
- Reason for filing code from the following table:

 NW
 New Well

 RC
 Recompletion

 CH
 Change of Operator (Include the effective date.)

 AG
 Add oil/condensate transporter

 CO
 Change oil/condensate transporter

 AG
 Add gas transporter

 CG
 Change gas transporter

 RG
 Add gas transporter

 RT
 Request for test allowable (Include volume requested)

 requested! If for any other reason write that reason in this box.
- 4. The API number of this well
- 5. The name of the pool for this completion
- 6 The pool code for this pool
- 7. The property code for this completion
- 8. The property name (well name) for this completion
- 9. The well number for this completion
- The surrace location of this completion NOTE: If the United States government survey designates a Lot Number for this location use that number in the 'UL or lot no.' box. Otherwise use the OCD unit letter. 10.
- 11. The bottom hole location of this completion
- 12. Lease code from the following table:
 - SP
- Federal State Fee
 - Jicarilla
 - NU
 - Navajo Ute Mountain Ute Other Indian Tribe
- The producing method code from the following table: F Flowing P Pumping or other artificial lift 13.
- MO/DA/YR that this completion was first connected to a 14. gas transporter
- 15. The permit number from the District approved C-129 for this completion
- MO/DA/YR of the C-129 approval for this completion 16.
- MO/DA/YR of the expiration of C-129 approval for this 17. completion
- 18. The gas or oil transporter's OGRID number
- 19. Name and address of the transporter of the product
- The number assigned to the POD from which this product will be transported by this transporter. If this is a new well or recompletion and this POD has no number the district office will assign a number and write it here. 20.
- Product code from the following table: O Oil G Gas 21 Oil Gas
- The ULSTR location of this POD if it is different from the well completion focation and a short description of the POD (Example: "Battery A", "Jones CPD",etc.) 22.
- The POD number of the storage from which water is moved from this property. If this is a new well or recompletion and this POD has no number the district office will assign a number and write it here. 23.
- The ULSTR location of this POD if it is different from the well completion location and a short description of the POD (Example: "Battery A Water Tank", "Jones CPD Water Tank", "Jones CPD Water 24. (Example: ' Tank',etc.)
- MO/DA/YR drilling commenced 25.
- 26. MO/DA/YR this completion was ready to produce
- 27. Total vertical depth of the well
- 28. Plugback vertical depth 29.
- Top and bottom perforation in this completion or casing shoe and TD is openhois 30.
- Write in 'DHC' if this completion is downhole commingled with another commission, 'DC' if this completion is one of two non-commingled completions in this well bure, or 'MC' if there are more than three non-commingled completions in this well bare.

- 31. inside diameter of the well bore
- 32. Outside diameter of the casing and tubing
- 33. Depth of casing and tubing. If a casing liner show top and botton
- 34. Number of sacks of cement used per casing string

If the following test data is for an oil well it must be from a test conducted only after the total volume of load oil is recovered.

- 35. MO/DA/YR that new oil was first produce
- 36. MO/DA/YR that gas was first produced into a pipeline
- MO/DA/YR that the following test was completed 37.
- 38. Length in hours of the test
- Flowing tubing pressure oil wells Shut-in tubing pressure gas wells 39.
- Flowing casing pressure oil wells Shut-in casing pressure gas wells 40.
- 41.
- Diameter of the choke used in the test 42.
- Barrels of oil produced during the test
- 43. Barrel: of water produced during the test
- 44. MCF of gas produced during the test
- 45. Gas well calculated absolute open flow in MCF/D
- 46. The method used to test the well:
 - Flowing

P Pumping S Swabbing If other method please write it in.

- The signature, printed name, and title of the persor authorized to make this report, the date this report was signed, and the telephone number to cell for questions about this report 47.
- The previous operator's name, the signature, printed name, and title of the previous operator's representative authorized to verify that the previous operator no longer operates this completion, and the date this report was signed by that person 48.

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